

KIPDA DISTRICT EARLY INTERVENTION COMMITTEE MEETING

April 24, 2006

Minutes

K.I.D.S. Center, Louisville, Kentucky

Members/Designees Present: Angie Guest, Barbara Borie, Julie Leezer, Sandy Milburn, Melinda Atkins, Cindy Holmes, Sue McGill, Becky Skrine, Mona McCubbin, Karen Pass.

Members/Designees Not Present or Represented: Carrie Bearden, Christie Dwyer, Ann Finney, Lynn Webster, Michele Harmon, Jon Lee, Shawna White, Ann Phillips, Jill Lemmenes.

Staff Present: Alicia Dailey, Cathy Moser, Anne Bolly.

Guests Present:

SUBJECT	DISCUSSION	ACTION
Minutes	March minutes were reviewed.	March minutes were approved as written.
Point of Entry Report	Cindy Holmes reported. <u>Referrals:</u> 197 for March. <u>Child Find:</u> 1) Kit Tossmann – St. Paul United Methodist Day Care. 2) Kit Tossmann – Norton’s Medical Associates. 3) POE participated in a booth at the Frankfort Ave. Trolley Hop – for Developmental Disability Month. Issues: 1) Still have not received clarification from Meredith Brown, Part C Coordinator, about reaching consensus when the PLE and the assessor(s) disagree on the developmental status ranking that they gave a child in a particular domain. Barbara Borie indicated that different ISCs/PSCs are giving different directions regarding consensus. Should they write an addendum to the report? Response was an overwhelming “no.” The report should stand as written. But providers should write staff notes and some service coordinators are also writing notes in the comments block of the IFSP. Cindy said that the	

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	<p>POE makes every attempt to get consensus before the IFSP, but if they can't, they use the PLE scores. Angie was concerned about some instances where they (Neonatal Follow-up) ranked the child "3" but the therapist ranked the child "0" and the child didn't get services. Another concern raised was that a child has a PLE, the SLP does a speech assessment but assigns a ranking in all the domains even though no testing was done in those domains. Cathy Moser said that there should be a justification for each ranking, which includes test scores. Cathy also said that we should give primary weight to the PLE scores for the Developmental Status Scale at the initial IFSP. We should not try to mix two things: 1) eligibility determination and suggested assessment and 2) assessment to determine the need for services. PLE is broad test; assessment is more in-depth. Can't expect the PLE and assessment to match. Angie has requested that the consensus issue be put on the agenda of the ICC Evaluation Subcommittee next Monday. The consensus from the DEIC about this issue is that it is a mess!</p> <p>2) 45-day timeline still going well. Steps taken since October have worked. Everyone is working together. They will participate in a small group that is meeting with NECTAC about the 45 day timeline. Cindy has completed the survey. She would like to know about how to adequately staff the POE.</p> <p><u>Shortages:</u> 1) Speech Language Pathologist, especially with feeding expertise, in all counties. Alicia asked if MFTs and psychologists were still needed, as reported by Kit Tossmann. Cindy said these could remain as needs.</p>	<p>KIPDA DEIC made a recommendation to Angie Guest to take to the Evaluation Subcommittee: For the initial Developmental Status Scale ranking, use the PLE score. Rationale: the PLE score is the base line for eligibility.</p> <p>Alicia will forward KIPDA provider list from Cindy to DEIC members. Members are asked to review the list and call or email Cindy with corrections.</p> <p>If requested, Cindy will email Alicia the list of referral sources to First Steps. Alicia will then forward it to the DEIC.</p>
<p>Technical Assistance Team Report</p>	<p>Program Consultant Report: Alicia Dailey reported. She read Meredith Brown's email to the U of L TAT regarding therapeutic intervention services and additional assessment(s) for Established Risk children with no delays. Dr. Shepherd, Germaine and Meredith discussed the issue and the decision is that established risk (ER) children who are developing normally should not receive assessment and treatment. However, all ER kids should have a plan for monitoring their development closely (by the PSC). There was extended discussion on this issue. Many concerns were expressed and some members felt that advocacy groups should be informed so that they can point to research on brain development that supports early intervention services before a delay becomes apparent. The DEIC also expressed that current practice (of ER</p>	<p>At the DEIC's request, Alicia will forward Meredith Brown's email about ER children to DEIC members.</p> <p>Recommendation: Jill Lemmenes speak at the next ICC meeting about her personal experience and feelings with her child not receiving services until there was a delay. Sarah Wilding, Acting ICC Chair, needs to be informed in advance.</p>

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	<p>children receiving one therapeutic intervention service and the IFSP team – at the meeting - requesting additional assessment(s) beyond the five-area assessment) is not against the regulations. However, the outcomes should be family outcomes and not child outcomes and the provider should not be seeing the child/family every week.</p>	
<p>Transition Update</p>	<p>Angie Guest, Julie Leezer and Melinda Atkins have been attending the Jefferson County Early Childhood Interagency Transition Agreement Team (JCECITA) meetings. A plan will be in place by the end of May. They are expanding on the agreement that First Steps already has with JCPS.</p>	
<p>Treasurer’s Report</p>	<p>Angie Guest reported. 1) She and Kay from the Clifton Center have emailed back and forth. Apparently, Kay’s boss – Cindy Adelberg – has told Kay that the certificate of insurance liability is no longer an issue and that they want our business and to proceed with the contract for next fiscal year. However, Angie has not received an email from Cindy yet. 2) Provider Fair – has only received 15 registrations.</p>	<p>Alicia will email Cindy Adelberg’s email address to Angie so that she can contact Cindy directly.</p> <p>Anne Bolly will send out another mass email and will attach the registration form. \$50 includes the manual. Angie also requested that Anne state in the email that providers do not have to be present at the fair in order to be included in the provider guide. Angie will see that their information is available at the fair.</p>
<p>Review Meeting Time</p>	<p>Change in meeting time: we will meet from 11:00-12:30 next month.</p>	<p>Alicia will send out meeting notice early.</p>

**Next meeting: May 22, 2006, 11:00 a.m. -12:30 p.m.
Board Room, K.I.D.S. Center, 982 Eastern Parkway**

**Agenda:
ICC Evaluation Subcommittee Meeting
Treasurer’s Update and Provider Fair
Transition Update**